

| POSITION                  | INITIALS | ID NO. | DATE      |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION         | J.B.     | 202005 | 1-3-00    |
| O.I.P.E. CLASSIFIER       |          |        | 101-19-00 |
| FORMALITY REVIEW          |          | 64477  | 1-28-00   |
| RESPONSE FORMALITY REVIEW |          | 64477  | 5-5-00    |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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